## PATENT APPLICATION FEE DETERMINATION RECORD Effective October 1, 2001

Application or Docket Number 10/019452

|   |  | CLAIN                            | A SI             | (Column             |                               | (Colu          | mn 2)                  | _       | MALL EL                     | MITY                   | OR       | OTHER<br>SMALL               |                        |
|---|--|----------------------------------|------------------|---------------------|-------------------------------|----------------|------------------------|---------|-----------------------------|------------------------|----------|------------------------------|------------------------|
| TOTAL CLAIMS                            |  |                                  |                  |                     |                               |                |                        | 1       | RATE                        | FEE                    |          | RATE                         | FEE                    |
| FOR                                     |  |                                  |                  | MAKEER FRLED        |                               | MUNICIPA EXTRA |                        |         | BASIC FEE                   | 445                    | OR       | BARIC FEE                    | ·                      |
| TUTAL CHARGEABLE CLAIMS                 |  |                                  |                  | ald minus 20.       |                               | • 2            |                        |         | X3 9-                       | .18                    | OR       | X\$18=                       |                        |
| INDEPENDENT CLASMS                      |  |                                  |                  | ' / minus 3 =       |                               |                |                        |         | X42-                        |                        | OR       | X84=                         |                        |
| MU                                      | LTIPLE DEPEN                                   | DENT CL                          | AIM PI           | RESENT              |                               |                |                        |         | +140=                       |                        | OR       | +280⇒                        |                        |
| • #                                     | the difference                                 | in columb                        | n 1 is           | less than z         | ero, ente                     | T In o         | otumn 2                | 1       | TOTAL                       | 163                    | OR       | TOTAL                        |                        |
| -17.05 (Column 1) (Column 2) (Column 3) |  |                                  |                  |                     |                               |                |                        |         | SMALL                       |                        | OR       | OTHER<br>SMALL               |                        |
| AMENDIMENTA                             |  | CLAU<br>REMAD<br>AFTE<br>AMENDA  | (BAG)<br>PA      |                     | HIGH<br>MUM<br>PREVIO<br>PAID | BER<br>OUSLY   | PRESENT<br>EXTRA       |         | RATE                        | ADDI-<br>TIONAL<br>FEE |          | RATE                         | ADDI-<br>TIONAL<br>FEE |
|   | Total  | . 2                              | 2                | Mirus               | - 2                           | 2              | · Q                    |         | X\$ 9-                      |                        | OR       | X\$18=                       |                        |
| 8                                       | Independent                                    | •                                |                  | Minus               | •••                           | 3              | • 0                    |         | X42-                        |                        | OR       | X84=                         |                        |
| Ш                                       | FIRST PRESENTATION OF MULTIPLE DEPENDENT CLAIM |                                  |                  |                     |                               |                |                        | 1       | +140=                       |                        | OR       | +280÷                        |                        |
|   |  |                                  |                  |                     |                               |                |                        | ı       | TOTAL<br>VODIT, REE         | 8                      | 00       | YOTAL<br>ADOT, FEE           |                        |
|   |  | (Cotum                           | n 1)             |                     | _(Cotus                       | mn 2)          | (Column 3)             |         |                             |                        | -        |                              |                        |
| EMT 6                                   |  | CLAL<br>REMAIN<br>AFTE<br>AMENDI | IS<br>UNG<br>PA  |                     | HIGH<br>NUM<br>PREVI<br>PAID  | BER            | PRESENT<br>EXTRA       |         | RATE                        | ADDI-<br>TIONAL<br>FEE |          | PATE                         | ADDI-<br>TIONAL<br>FEE |
| POMENT                                  | Total  | . 9                              |                  | Mirin               | - 7                           | 22             |                        |         | X\$ 9=                      |                        | OR       | X\$18=                       |                        |
|   | Independent                                    | • 1                              |                  | Marus               | -                             | 2_             | -                      | 11      | X42-                        |                        | ОЯ       | X84=                         |                        |
| لــا                                    | FIRST PRESE                                    | NTATION                          | OF MI            | ATIPLE DE           | PENDEN                        | CLAIM          |                        | 1       | +140=                       |                        | OR       | +280=                        |                        |
|   |  |                                  |                  |                     |                               |                |                        |         | TOYAL<br>VOCAT, FEE         |                        | OR       | ADDIT, FEE                   |                        |
| (Column 2) (Column 3)                   |  |                                  |                  |                     |                               |                |                        |         |                             |                        |          |                              |                        |
| MC                                      |  | CLAH<br>REMAH<br>AFTI<br>AMENDI  | US<br>NENG<br>SR |                     | NUM<br>PREVI                  |                | PRESENT<br>EXTRA       |         | RATE                        | ADDI-<br>TIONAL<br>FEE |          | RATE                         | ADDI-<br>TIONAL<br>FEE |
| AMENDMENT                               | Total  | . 7                              |                  | Mirrus              | - 1                           | 12             | . –                    | 1       | X\$ 9-                      |                        | OR       | X\$18=                       |                        |
|   | Independent                                    | •                                |                  | Minus               | 250                           | 3              | •                      |         | X42=                        |                        | OR       | X84=                         |                        |
| 4                                       | FIRST PRESE                                    | NOTATION                         | OF M             | ULTIPLE DE          | PENDEN                        | CLAIM          |                        |         |                             |                        |          |                              |                        |
| -                                       | if the entry in colu<br>If the "Highest No     | mhar Presid                      | results P        | aid For IN T        | KS EPACE                      | 13 1823 (7)    | in 20. <b>Graph</b> "2 |         | +140=<br>TOTAL<br>DOTT, FEE |                        | OR<br>OR | +280=<br>TOTAL<br>ADDIT. FEE |                        |
|   | of the Highest Num<br>The Highest Num          |                                  |                  | الآلالا فيمنا ابتيا | JIQ EDALE                     | in laws the    | n3 606 3."             | ser to. | end in the ap               |                        |          |                              | -                      |
| _                                       |  |                                  |                  |                     |                               |                |                        | -       | and You'de                  | mark Office L          | 18 DE    | PLATMENT O                   | FOOMMERCE              |